PTO/SB/22 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. **Docket Number (Optional)** PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) 219002034300 FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) 10/719,082 Filed November 20, 2003 Application Number USE OF TGF-BETA INHIBITORS TO COUNTERACT PATHOLOGIC CHANGES IN THE LEVEL OR For **FUNCTION OF STEROID/THYROID RECEPTORS** Art Unit 1616 Examiner N. Handy This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): <u>Fee</u> Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 Two months (37 CFR 1.17(a)(2)) \$450 \$225 Three months (37 CFR 1.17(a)(3)) \$1020 \$510 1,020.00 Four months (37 CFR 1.17(a)(4)) \$795 \$1590 Five months (37 CFR 1.17(a)(5)) \$1080 \$2160 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this . submission in duplicate. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent whater 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 April 30, 2007 Signature Date (858) 720-7940 James J. Mullen, III Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more

05/04/2007 SSITHIB1 00000028 031952 10719082

Total of

than one signature is required, see below.

01 FC:1253

1020.00 DA

forms are submitted.

Х

PTO/SB/17 (02-07)
Approved for use through 02/28/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007 Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 1,020.00 Attorney Docket No. 219002034300 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify):		
First Named Inventor Linda S. HIGGINS Examiner Name N. Handy Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1616 TOTAL AMOUNT OF PAYMENT (\$) 1,020.00 Attorney Docket No. 219002034300 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify):		
First Named Inventor Linda S. HIGGINS Examiner Name N. Handy Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1616 TOTAL AMOUNT OF PAYMENT (\$) 1,020.00 Attorney Docket No. 219002034300 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify):		
Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1616 TOTAL AMOUNT OF PAYMENT (\$) 1,020.00 Attorney Docket No. 219002034300 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify):		
TOTAL AMOUNT OF PAYMENT (\$) 1,020.00 Attorney Docket No. 219002034300 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify):		
METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify):		
Check Credit Card Money Order None Other (please identify):		
x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)		
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee		
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		
FEE CALCULATION		
1. BASIC FILING, SEARCH, AND EXAMINATION FEES		
FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity		
Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$)		
Utility 300 150 500 250 200 100		
Design 200 100 100 50 130 65		
Plant 200 100 300 150 160 80		
Reissue 300 150 500 250 600 300		
Provisional 200 100 0 0 0 0		
2. EXCESS CLAIM FEES Small		
Fee Description Fee (\$)	<u>(\$)</u>	
Each claim over 20 (including Reissues) 50	25	
•	00	
• •	80	
Total Claims		
-= x = 0.00 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.	- 1	
HP = highest number of total claims paid for, if greater than 20. 0.00 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)		
-= x = 0.00		
HP = highest number of independent claims paid for, if greater than 3.		
3. APPLICATION SIZE FEE		
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer		
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50		
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)		
Total Sheets	'	
4. OTHER FEE(S) Fees Paid (
Non-English Specification, \$130 fee (no small entity discount)	_	
Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00		
SUBMITTED BY		
Signature Registration No. (Attorney/Agent) 44,957 Telephone (858) 720-794)	
Name (Print/Type) James J. Mullen, III Date April 30, 2007		